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EUTHANASIA.

HERBERT L. STEWART.

IN a characteristically mordant passage Mæterlinck has poured scorn upon what he regards as a superstitious timidity of the medical profession.¹ He refers to the doctors who exhaust every scientific method in order to prolong a life which is plainly forfeit to some hopeless and excruciating disease. He stigmatises this use of knowledge as "enabling mankind only to die in greater pain than the animals that know nothing." If such scruple be right, why, he asks, are opiates constantly administered, which dull pain at the price of weakening the final resistance? Is it not inconsistent in a doctor to give morphia as an analgesic, but to refuse under any circumstances to prescribe a lethal dose? For the morphia even in so-called "safe" quantities will often hasten the end. Mæterlinck finds the explanation in those lingering religious fears which the scientific practitioner is now ashamed to acknowledge, because the corresponding beliefs have died away, but which, like many another vestigial relic of obsolete mental habits, can influence conduct long after they have ceased to form part of a creed. Medical men, it seems, are still subconsciously not less terrified than Hamlet of "something after death." At all events they act *as though they were convinced* that the ills we know not of are so great as to justify us in deferring them at any cost in present torture. "Of two evils, to avoid that which they know to be imaginary, they choose the real one." Although the chief pain of death is in the tedious expectation of it, yet the horror of that which is not in itself to be dreaded has become a pretext for extending the very circumstance by which alone one's latter end is made genuinely horrible. And the prediction is, of course, offered that in time science

¹ The passage is in Chaps. VI-X of his book entitled *Death*.

will repudiate this cowardice, and facilitate rather than delay the happy despatch.

In this article no account will be taken of what Mæterlinck so contemptuously dismisses as "barbarous prejudice." The problem will be faced quite apart from those motives or prohibitions that are drawn from religion. This limit will be observed, not in the least because the writer acquiesces in this purely secular attitude, but simply for the sake of clearness, and to secure the advantage of considering one question at a time.

The very completeness of the case which our nimble critic makes out might well suggest to him that it is worth while to look at it again, and to ask whether in view of so widespread a feeling in this age of loosened religious apprehensions there is not more to be said than he has himself allowed for. If the argument is internally so rigorous as at first sight it appears to be, may there not be a doubt about some latent presupposition which has been taken as so obvious that there is no need to prove it, or even to mention it? The moment we view the matter so, we notice that Mæterlinck assumes as the only relevant consideration an accurate balancing of pleasures and pains. And to take this for granted will evoke vehement protest from not a few of the least theologically minded moralists of our time.

Common thinking no doubt assumes the same. The everyday pessimist thinks his case against life has been made clear once for all in the lines of Byron:

Count o'er the joys thine hours have seen,
Count o'er thy days from anguish free,
And know, whatever thou hast been,
'Tis something better not to be.

Or again, in words more precisely appropriate to the problem before us:

The silence of that dreamless sleep
I envy now too much to weep;
Nor need I to repine
That all those charms have passed away
I might have watched through long decay.

It is a short step from this to the question whether there are no cases in which release may be artificially accelerated. But are there no grounds for the prevailing "prejudice" except fears of hell?

Now it is plain that if we have no principle in mind but the calculus of pleasures and pains, we shall become much embarrassed with other problems besides that of Euthanasia. This is only one of a group which surround the opening as well as the close of life. Should the embryo be destroyed when childbirth would be exceptionally perilous or exceptionally exhausting? Is it right to rear an infant that is congenitally deformed? What degree of guilt belongs to the crime of abortion, when no special danger is dreaded, and the object is merely to escape inconvenience? If we discount as mere prejudice the common conviction of an inviolable sanctity in life, the answer to these puzzles will be made still harder than it has yet been. It will vary with the temperament of the person judging, with the degree for instance of his personal sensitiveness to pain, and with his estimate of the sources from which a human being may become able to derive pleasure. Who knows whether the hedonic result will be positive or negative if we choose to preserve a mother with unimpaired vitality rather than a sickly mother *plus* a normal babe? Who can tell whether the birth that is prevented would have been the beginning of happiness or of misery? Who can decide whether the deformed child would have enjoyed the world less than a robust one? And it seems quite impossible to set limits to the pleasure calculus in such a fashion as to use it only in respect of those whose acute disease has brought them to the brink of death. Does not a like principle apply to those whose chronic ailment forbids the hope of permanent cure, but not the expectation of a long continued and futile invalidity. Why should we shorten the term for the senile paralytic but not for the young victim of a deep-seated tuberculosis?

If, however, the advocates of Euthanasia owe the force of their argument to over-simplification, those on the other

hand who denounce Euthanasia often escape the sting of the problem by artfully misstating it. For example, they draw a sharp distinction between actively causing death and merely withholding that medical or surgical treatment by which death would be delayed. They would not administer a dose of opium which they knew would be fatal, but they would refuse to perform an operation whose value would be no more than temporary. Sometimes they seem to invoke the old casuistical argument, so much derided by Pascal, about "directing the intention." "A military man," says the monk in *Provincial Letters*, "may demand satisfaction on the spot from the person who has injured him,—not indeed with the intention of returning evil for evil, but with that of preserving his honour." Thus it is suggested that a drug may be given with the design of relieving pain, even though any pharmacist would have had a shrewd guess that the effect would be lethal. Surely one is responsible for the consequence of one's action, in so far as that consequence was foreseen, even though it was not explicitly aimed at. The surgeon who declined to remove an appendix in a normally promising case would not be guiltless of the death which he knew how to prevent. It may be, indeed, that there are some deaths which should not be prevented. But can we say that he who, when in charge of a patient, conduces to a fatal issue by his wilful omission is less accountable for it than he who brings it about by his wilful performance?

To put it so may seem like the tyranny of a harsh logic, fit only for those little minds which Emerson reproached for their narrow determination to be "consistent." A multitude of persons would, beyond doubt, passively watch that approaching doom which they would not for worlds lend a hand to precipitate.² And let no athlete of logic deny that their mind is honest and their purpose is pure.

² E.g. the famous Chicago case of two years ago, when a surgeon declined to save by operation the life of an infant whose mind would necessarily be defective. Many persons who approved his "leaving nature to take her course" would have heartily condemned a deliberate infanticide.

Yet as Lord Morley has recently reminded us, great thoughts, though they come from the heart, must go round by way of the head. It does seem useless to whittle our problem down, to make ourselves think that we have solved it when we have only taken means to verbally disguise it, or when we have managed to confuse it with some other problem which, rightly stated, presents no difficulty. One judges with clearness upon it only in proportion as one makes the alternatives sharp, unambiguous, uncompromising. We have to picture the physician at the bedside of a patient whom he is morally certain that he cannot save, but whom he is similarly certain that he can for some time keep alive. Every medical man has met with such cases. Probably not a few medical men have acted in regard to them upon a principle which they would have been afraid to formulate even to themselves. They have taken palliative measures which "involved enormous risk, but were justifiable in such desperate circumstances," while in their hearts they suspected that the last agony would thus be abbreviated. When they thought about it after the death, they would have hated to lay down any universal maxim, felt perhaps no slight general uneasiness, but consoled themselves with a sort of instinctive feeling that "on the whole it was for the best." Surely it would be advantageous that one's mind should face the facts in their nakedness, and state a rule of which conscience need not be ashamed.

The revolutionary advocates argue thus:

Here is a suffering invalid, who has nothing to look forward to but a short time of ignominious and extending distress. The values of life have for him departed finally and irrevocably. He has full use of his faculties, but they waken each day to a darker prospect. His pain is not merely personal; it is shared sympathetically by those dearest to him and he knows well that for his own sake they hope the end may not be far off. He is moved by no individual whim, but by the considered judgment of the medical expert that all thought of improvement is vain.

Why may he not summon his doctor, state his reasoned wish, secure an unbiased concurrence on the part of his family, and give his written sanction to the sole expedient of mercy which the circumstances permit? Is not this the generous and the far sighted thing to do? We applaud the man who sacrifices himself on the battle field, on police duty, in the ward of the infectious hospital, that others may benefit. What distinguishes this case from those? May we not even bring it under the majestic law, "Greater love hath no man than this, that a man lay down his life for his friends?"

It is always worth while in an ethical enigma to look back at the history of man's ideas on the subject. Modern Eugenism, for instance—always a little self-conscious in its intellectuality—is wont to put forth its more extreme proposals as if they were the pure outcome of advanced scientific insight. The truth is, as all historians are aware, that thoroughly uncultured Sparta was "advanced" in just the same fashion, and, as anthropologists have of late assured us, that the systematic selection of infants to be reared is carried out by primitive savage tribes with a sociological resoluteness that would put Mr. F. H. Bradley to shame. To know this should suggest to the Eugenist a fresh self-examination. He should make sure that he is really aiming at that social improvement in which each will be the care of all, not reverting to that social crudeness under which the individual was a mere instrument of the tribe. Killing the aged and infirm is an ancient custom of the Hottentots, and they defend it just on Mæterlinck's ground of an intelligent compassion. The Chukchi speak of "the friendly stroke which lets out the scanty remnant of existence." The outworn Melanesian chief begs to be put out of his misery when he is no longer fit to sustain his old prowess, and his relatives think it a disgrace if they have left him to the slow decay of nature. The Hawaiians, the New Zealand aborigines, the Australian Blackfoots are unanimous, if not on "birth-control," at least on the social need for a stern sifting of the cradle that the racial type

may not degenerate. Infanticide and abortion in the Græco-Roman world were regarded with indulgence, and often with approval.

But closest to the problem we have set out to discuss was that puzzle about suicide which so exercised the minds of the Roman Stoics. De Quincey in an astonishing paragraph tells us that the only book ever written in palliation of suicide was Donne's *Biathanatos*, and notes the curious fact that the author should have been a Christian divine! Was De Quincey quite unacquainted with Pliny's *Letters*? Case after case is there recorded, in which the argument is developed on both sides, and we are left in no doubt as to Pliny's personal view. What should be done in a situation of incurable disease was much discussed during that sombre, introspective period of Roman society under the early Cæsars. We read of Titus Aristo, who summoned a council of physicians to tell him whether his ailment was hopeless, announcing that out of regard to his friends he would make a fight for life so long as he had a fighting chance, but that if no chance remained he must not be prevented from anticipating his fate.³ The deathbed of Tullius Marcellinus is described as the scene of a similar grim debate, and the decision is reached that suicide is the only rational course.⁴ Seneca insists that here is one of the few cases in which each may fitly follow his individual impulse, for a man's life at least is his own, and he is as much entitled to choose how and when he will give it up as to select the ship in which he will sail on a journey or the house which he means to inhabit.⁵ That there remained a refuge from humiliation of which even Nero could not deprive his victims was the chief comfort of many a Roman noble under the Terror. Those who preferred to quote Epicurus rather than Zeno dwelt upon the axiom that each man may choose whether he will await Death coming to him or whether he will go to meet Death. Epictetus bade

³ Pliny, *Epistles* i, 22.

⁴ Seneca, *Epistles* lxxvii.

⁵ *Ibid.* lxx.

his disciples remember above all things that "the door is open," that like boys at play when we are tired of the sport we can decide to end it, and that while this alternative remains we should not both continue and complain.⁶

The old Stoics were far indeed from that bald hedonistic calculus which, in the passage I have referred to, seems to be endorsed by Mæterlinck. They had much more in mind than a weighing of rival amounts of pleasure. What they contemplated was a life which had lost its prospect of dignity, of worth, of civic action. They felt reluctant to make themselves a deadweight upon others. They looked upon disease less in its character of painfulness than in that of degradation. In a word, what they had in view was the preserving of that Roman *gravitas* from which all the Roman virtues were supposed to spring. And Donne in the passage quoted by De Quincey took a similar attitude. He held that choice was permissible, but not a capricious choice, and that the guilt of choosing wrongly had various degrees of heinousness. He argued that just as the killing of another may, according to circumstances, be murder, or man-slaughter, or justifiable homicide, so he who kills himself must have the ground of his act investigated before we can say how he should be judged.

Now it is undoubtedly a fact that the new sense of inviolableness in life was introduced by the Christian religion, and that it was there connected closely with the doctrine of a future state. This, however, does not mean that the value of the new principle is for ever bound up with the truth of the doctrine on which it originally rested, so that those who have moved away from this part of the Christian creed must, if they are logical, sit light by the corresponding part of Christian practice. There are many instances where a moral plane, reached at first in obedience to a dogma, has been kept for excellent reasons which the dogma did not, at least directly, contain. The first great movement of the Church against slavery—the movement which led to multiplied manumissions and the pledging of eccl-

⁶ Arrian, i, 24.

siastical treasure to ransom prisoners from enslavement—had its origin in the belief that all mankind have immortal natures, redeemed at the same infinite price. The protest against war and against the gladiatorial show arose from the feeling that none may send another unsummoned into an eternity for which his soul is unprepared. The impulse of charity was rooted in the hope that by giving alms to the poor the giver would acquire a holiness which fitted him for the inheritance of the blessed. But the deepened humanitarianism remained long after men had begun to interpret equality as a rule for this world apart from all thought of the next, long after a less rigorous view had been taken of judgments to come, long after the relieving of distress had ceased to be relied on as a means to the selfish acquisition of merit for the donor. In the same way our belief in the sanctity of life may well be independent of those theological considerations which first gave rise to it, and might even without in consequence survive their total abandonment. The question is, what value has this sentiment of inviolable reverence for mankind to-day? Mæterlinck's airy confidence in answering it is that of one very insufficiently skilled in the ethical interpretation of the past.

I beg to submit regarding our problem the following considerations:

(a) Let us avail ourselves of the light that is always cast by putting an extreme instance. If in a hopeless case a sufferer's distress reached the utmost limit of excruciation that was compatible with continued consciousness, if no anodyne were available by which it could be assuaged, if it were likely to be long drawn out, and if the sufferer himself, fully apprised of the facts, were pleading for release, it seems certain that no one, except under the compulsion of those religious terrors which we have agreed to exclude from the inquiry, would condemn the doctor who fore stalled death. More than this, it seems not less certain that our humane sentiments would make us condemn the doctor who refused to do so, and that those humane persons

who did not condemn him would be either consciously or unconsciously governed by religious restraints which they were endeavouring to disguise under another name.

But the argument from an extreme instance is always liable to be confronted by the argument from the other extreme. Young Prothero in *The Research Magnificent* cannot understand how Benham had courage to cross a field against the menace of a bull. He asks how far such foolhardiness would go. Suppose it had been an elephant? A mad elephant? A pack of wolves? Benham aptly retorts, "Well, suppose in *your* case it had been a wild cat? A fierce mastiff? A lap dog?" So when Mæterlinck asks us where we mean to stop in the way of palliating timidity we may ask where he means to stop in the way of heroic daring. Would he connive at a happy release for the pneumonia patient against whom the chances seemed to preponderate? Would he kill because the cure must be tedious, or painful, or of dubious success? Would he allow a *liberum arbitrium* to the individual's own estimate of surplus pleasure and pain? Would he gratify the habitual melancholic, or yield to the fretful demand of the victim of *ennui*? It is quite certain that he would not defend Euthanasia for all persons to whom, either in a momentary mood, or even by constant temperamental preference, death seemed the more agreeable solution. Still less would any surgeon with a conscience consider the propriety, even if the patient asked for it, of ending a life because it had become burdensome to his nursing relatives. Plainly then there are some considerations other than those of the hedonistic calculus, by which the acceptance of this tremendous responsibility has to be decided.

(b) The result is not more definite if we include the consideration as to whether a life has permanently lost its prospect of "usefulness" or "dignity." Such matters are, as a rule, far beyond our coarse scales of measurement to appraise. There are dignities, and there are even high social uses, which belong especially to the last scene. It is not only when thought of as the entrance to a new career

that majestic impressiveness surrounds the final parting. The concluding chapters of Plato's *Phædo*, although lit up with no such radiant confidence, present a picture that has been gazed upon by the best men with reverence for more than two thousand years. How much less precious would have been the legacy of Socrates to his circle and to us, if there had been any failure in his fortitude, or any clutching at a wretched anodyne! And would there not have been greater excuse for thus anticipating an unjust sentence than for shirking the common lot of mankind? One need make no large assumptions of evangelical piety to see in the aged who calmly await their end, or in the young who bear up without repining against the ravages of premature decay, an example of patient endurance and of the highest sort of moral courage which this fretful world cannot afford to lose. If the cynic calls this an unreal idealisation of what in practice is only sordid and distressing, there is not a rural doctor or a rural clergyman whose experience will not put such cynicism to shame. Perhaps the lesson taught by such obscure heroes in their death is more than all our most subtle moralist will ever teach by the admonitions of a lifetime.

(c) There seems to be no doubt that the advocates of Euthanasia indulge in much rhetorical exaggeration about medical helplessness in the last stages of a painful disease. I speak as a layman, and with the desire to be corrected if I am wrong. But it is surely a fact that scientific advance has placed resource after resource at the physician's disposal, by which, when cure cannot be expected, suffering may be more and more efficiently checked. If one sort of analgesic is too dangerous for the special case, others are available. Nor is it really improper to say that larger risks may be faced in proportion as the distress is extreme. In all sorts of situation risk is legitimate in the ratio of the good that may be achieved. But there is a world of difference between accepting a remote chance if it is a *real* chance, and taking measures under the pretence of chance where there is no chance at all. On the whole it seems

certain that those poignant cases so often presented to us as if they were habitual are in truth among the very rarest exceptions in medical practice.

(d) Even if we were clear about the principle, the application of it would be full of difficulties. It would, of course, be necessary to state with the utmost rigour, and to embody in legal formulæ, the terms upon which medical men might exercise their new and most alarming powers. The effect of such an announcement would extend far beyond the circle of those who had any desire to take advantage of it. It would be received with horror by very many persons who would think of themselves as presenting to the eye of the world cases that were *prima facie* suitable for such treatment. Their minds would dwell upon it with the more morbid persistence just as they grew weaker and less able to appreciate the limits by which the lethal authority was hedged about. For them the whole relationship between physician and patient would be degraded. An affectionate confidence on the part of the invalid towards those who care for him is the basis of all successful healing. How many infirm persons will look upon their doctor not with confidence but with a terrified distrust, once they realise that he approaches them for any other purpose than to cure? Once they understand that he may probably be weighing in his mind whether on the whole he ought not to suggest that they be quietly and mercifully killed? It is idle to say that under no circumstances would such a step be considered without the patient's consent and even the patient's initiative. Is he to look forward to his last weeks with the thought that the world expects him, as a man of intelligence, to face the dilemma about a "useful" or a "useless" life? Is it to be impressed on him that he has to choose when he shall cease to be a charge and a trial to his relatives? That an exhausted and nerve-racked sufferer should have to feel this option resting upon himself, that he should think of those around as silently criticising his irrational cowardice and judging him—like Charles II—for being "such an unconscionable time in dying," that

he should recognise in each new visit of his medical adviser another occasion on which his own obstinate vitality is being reviewed and deplored—all this constitutes a picture from which the most coldly scientific might recoil. A new pang will be added to old age if one has to keep probing one's conscience as to whether the will to live has not some admixture of selfish inconsiderateness. A new distress will poison the ministries of the sick room if one has any ground to suspect that the tender offices of friendship are rendered amid a protesting sense that it is not reasonable that they should any longer be imposed. A new terror will surround the deathbed if the expert attendant must be expected to come, not with the eager enthusiasm of a healer, but with the unflinching scrutiny of Eugenics, and the frigid impartialities of Race Culture.

(e) In this, as in a multitude of moral problems, it is not enough to ask ourselves how the arguments are balanced in some rare and extraordinary case. We must ask whether the remedy which we establish as a special resort for special need would not in all likelihood be misapplied in other and most unsuitable cases. I am far indeed from suggesting Kant's maxim that conduct must be bad if it cannot be universalised. Often what is right for A who is exceptionally placed would be wrong for B whose position is not exceptional. But A ought to consider the probability in this imperfect world of his example spreading where its effect will be thoroughly evil. He must often sacrifice something to which he may feel personally entitled, because he could not obtain it without causing harm to his neighbour. For instance, nine-tenths of the plausible case for a widely extended facility of divorce would break down if it were remembered that for one unhappy marriage where good would be done by a more flexible law there are a dozen marriages in which such a precedent would be, not indeed legitimately, but none the less disastrously abused. Moral compromise, as Lecky called it, is of the very essence of our duty to our neighbour. And though all the considerations I have so far urged were to be discounted,

there would still remain much force in the argument that a permission of Euthanasia would inevitably lower mankind's regard for the sanctity of life, would introduce the habit of casting up advantages and disadvantages, and would expose us in the gravest sphere of all to those dangers by which the casuist is notoriously beset. Nicholas Bulstrode in *Middlemarch*, watching by the bedside and allowing himself to think whether the death of the patient would not on the whole be "for the glory of God," is no doubt an appallingly extreme example. But the risk of abuse is plainly real, and the abuse if it should occur is frightful to contemplate. The plea about a man's laying down his life for his friends may well be met by the plea that he should keep his life lest he set his friends a pattern by which mankind's most precious quality of fortitude will be weakened, the all too seductive spirit of self-indulgence will be reinforced, and the dishonesty of seeking reasons to forsake the former and yield to the latter will be more and more diffused. Perhaps the present, time when circumstances have made us hold the individual life cheaper than ever before, is specially unsuited to such an experiment.

It is not, however, my purpose to advance any dogmatic position, so much as to set forth certain aspects of our problem which have been less emphasised than their importance seems to deserve. The case for the innovating school is easy to maintain, so easy indeed as to arouse a very legitimate suspicion of its depth. The modern psychologist is quite at one with Condorcet in his remark that men preserve the prejudices of childhood, country, and age, long after they have recognised all the truths by which such prejudices should be destroyed. But it is not less true that the inveterate traditions of mankind contain as a rule some principle which is by no means wholly absurd. No doubt senseless prejudice is always tenacious. But it does not follow that all tenacity of belief in men who cannot justify themselves by reasoning is the result of a prejudice that is intrinsically senseless. In a poignant case the argument for suicide may seem dialectically complete. Yet who

does not feel with "godless Billy" in *Lavengro* that after all suicide is both undignified and unheroic? Perhaps the upshot of our survey is to make us feel less confident in a logic which would set at naught the slowly consolidated resistances of the common conscience, and more respectful to a tradition which logic did not form, but which—often to our intense surprise—it is forced in the end to vindicate.

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